

FEB 3 2000

VOCO GmbH · Postfach 767 · 27457 Cuxhaven

K994268

Anton-Flettner-Straße 1-3 27472 Cuxhaven (Germany) Telefon: (0 47 21) 719-0 Telefax: (0 47 21) 719-109

Telex: 2 32 202 dent d

Ihr Zeichen yr. ref.

Г

Ihre Nachricht vom dtd.

Unser Zeichen our ref.

┙

Datum date

510(k) SUMMARY

ARABESK® TOP (76 EBF)

- 1. SUBMITTER'S NAME
- 2. CONTACT PERSON for VOCO GmbH
- 3. DATE THAT 510(k) SUMMARY WAS PREPARED
- 4. NAME OF THE MEDICAL DEVICE (Classification / Common / Proprietary)
- 5. LEGALLY MARKETED DEVICES TO WHICH SUBSTANTIAL EQUIVALENCE IS CLAIMED
- 6. DESCRIPTION OF THE DEVICE
- 7. INTENDED USE OF THE DEVICE
- 8. TECHNOLOGICAL COMPARISON BETWEEN SUBJECT AND PREDICATE DEVICES
- 9. SUMMARY OF PRECLINICAL PERFORMANCE STUDIES AND CONCLUSIONS FROM PRECLINICAL PERFORMANCE STUDIES

1. SUBMITTER'S NAME

VOCO GmbH Anton-Flettner-Str. 1-3 27472 Cuxhaven GERMANY

Tel: 011-49 47 21 719 0 Fax: 011-49 47 21 719 140

2. U.S. REGULATORY CONTACT PERSON FOR VOCO GmbH

Evan Dick, Ph.D. E.G. Dick & Associates 7527 Westmoreland Avenue St. Louis, MO 63105

Tel: (314) 721-0112 Fax: (314) 721-7591

3. DATE THAT 510(k) SUMMARY WAS PREPARED

December 1, 1999

4. NAME OF THE MEDICAL DEV	ICE
Classification name	Material, tooth shade, resin (Dental 76 EBF)
Common / usual name	Light-curing composite filling material
Proprietary names	ARABESK® TOP

5. LEGALLY MARKETED DEVICES TO WHICH SUBSTANTIAL EQUIVALENCE IS CLAIMED

- Tetric Ceram (K964285, Ivoclar)
- Charisma (K910263, K954929, Kulzer)

6. DESCRIPTION OF THE DEVICE

Arabesk Top is a light-curing, radiopaque ceramic microhybrid composite filling material for both anterior and posterior applications, as well as for inlay techniques. Arabesk Top contains 77% by weight (56% by volume) inorganic fillers, microfillers (~0.05 μ m), and small particle fillers (~0.7 μ m). The methacrylate monomers consist of BIS-GMA, UDMA, and TEDMA.

Arabesk Top is available in bulk dispensing syringes (4gm each) and in singleuse applicator-tip capsules (0.25 gm each).

7. INTENDED USE OF THE DEVICE

Arabesk Top is a composite filling material for both anterior and posterior applications, as well as for inlay techniques. Indications for use are:

- Class I-V fillings
- Reconstruction of traumatically affected anteriors
- Veneering of discolored anteriors
- Color and/or shape corrections to improve asthetic appearance
- Locking or splinting of loose anteriors
- Extended fissure sealaing for molars and premolars
- Repairing veneers
- Core build-up under crowns
- Especially suitable for composite inlays

8. TECHNOLOGICAL COMPARISON BETWEEN SUBJECT AND PREDICATE DEVICES

Arabesk Top, Tetric Ceram, and Charisma are all single-component, light-curing composite filling materials that are composed of inorganic silicates (~72-77%, w/w), methacrylates (~20-22%, w/w), photoinitiators and pigments (~1%. w/w). The subject and predicate devices are substantially alike with respect to such performance properties as compressive strength, polymerization shrinkage, color stability, and resistance to abrasion.

9. SUMMARY OF PRECLINICAL PERFORMANCE STUDIES AND CONCLUSIONS FROM PRECLINICAL PERFORMANCE STUDIES

Arabesk Top is formulated from chemical components that are commonly associated with currently marketed dental composite materials.

The chemistry of Arabesk Top raises no new issues or questions that effect safety, effectiveness, or biocompatibility for a dental composite product.



FEB 3 2000

Food and Drug Administration 9200 Corporate Boulevard Rockville MD 20850

Mr. Evan Dick c/o E.G. Dick & Associates 7527 Westmorland Avenue St. Louis, Missouri 63105

Re: K994268

Trade Name: Material, tooth shade, resin (Dental 76 EBF)

Regulatory Class: II Product Code: EBF

Dated: December 17, 1999 Received: December 17, 1999

Dear Mr. Dick:

We have reviewed your Section 510(k) notification of intent to market the device referenced above and we have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into either class II (Special Controls) or class III (Premarket Approval), it may be subject to such additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 895. A substantially equivalent determination assumes compliance with the Good Manufacturing Practice for Medical Devices: General (GMP) regulation (21 CFR Part 820) and that, through periodic GMP inspections, the Food and Drug Administration (FDA) will verify such assumptions. Failure to comply with the GMP regulation may result in regulatory action. In addition, FDA may publish further announcements concerning your device in the Federal Register. Please note: this response to your premarket notification submission does not affect any

obligation you might have under sections 531 through 542 of the Act for devices under the Electronic Product Radiation Control provisions, or other Federal laws or regulations.

This letter will allow you to begin marketing your device as described in your 510(k) premarket notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801 and additionally 809.10 for in vitro diagnostic devices), please contact the Office of Compliance at (301) 594-4692. Additionally, for questions on the promotion and advertising of your device, please contact the Office of Compliance at (301) 594-4639. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR 807.97). Other general information on your responsibilities under the Act may be obtained from the Division of Small Manufacturers Assistance at its toll-free number (800) 638-2041 or (301) 443-6597 or at its internet address "http://www.fda.gov/cdrh/dsmamain.html".

Sincerely yours,

Timothy A. Ulatowski

Director

Division of Dental, Infection Control and General Hospital Devices Office of Device Evaluation Center for Devices and Radiological Health

Enclosure



INDICATIONS FOR USE STATEMENT

510(k) Number (if known): <u>K994768</u>

Device Name:	Arabesk® Top	
Indications For Use	·	
Arabesk® Top is a light-curing, radiopaque ceramic microhybrid composite filling material for both anterior and posterior applications, as well as for inlay techniques. Arabesk® Top is intended for use in restoring:		
 Class I-V fillings Reconstruction of traumatically affected anteriors Facetting of discolored anteriors Color and/or shape corrections to improve asthetic appearance Locking or splinting of loose anteriors Extended fissure sealaing for molars and premolars Repairing veneers Core build-up under crowns Especially suited for composite inlays 		
(PLEASE DO NOT WRITE BELOW THIS LINE - CONTINUE ON ANOTHER PAGE IF NEEDED)		
Concurrence of CDRH, Office of Device Evaluation (ODE)		
Prescription Use OR Over-The-Counter Use (per 21 CFR 801.109) Sugar Pure (Division Sign-Off) Division of Dental, Infection Control, and General Hospital Devices 510(k) Number		